

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010237

FILED
Mar 29, 2009
Secretary of State

Entity Name: WORDS FOR LIFE INTL. MINISTRIES, INC.

Current Principal Place of Business:

1935 SW 31ST AVENUE
106
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

1935 SW 31ST AVENUE
106
OCALA, FL 34474

New Mailing Address:

FEI Number: 20-2309799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKER, YVONNE L
1935 SW 31ST AVENUE
106
OCALA, FL 34474 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAKER, YVONNE L
Address: 1935 SW 31ST AVENUE, #106
City-St-Zip: Ocala, FL 34474

Title: D () Delete
Name: BAKER, RUTH-ANN P MISS
Address: 1935 SW 31ST AVENUE, #106
City-St-Zip: Ocala, FL 34474

Title: D () Delete
Name: CLARKE, SOPHIA MS.
Address: 208 NW 43RD AVENUE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: BAKER, YVONNE L
Address: 1935 SW 31ST AVENUE, #106
City-St-Zip: Ocala, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YVONNE L BAKER

P

03/29/2009

Electronic Signature of Signing Officer or Director

_____ Date